

Compare plans, estimate costs

3 simple steps to assess your plan options

Step 1: Enter the **yearly premium** for the plans you're comparing. The tool will automatically calculate the monthly premium.

Step 2: Next, enter the **deductible, copay/coinsurance** and **out-of-pocket (OOP) max** for the plans you're comparing.

Step 3: Finally, review the final calculations and costs to see what's best for you.

Looking for your premium, deductible, copay/coinsurance and OOP max information? You can find them in your employer's summary plan document.

Plans						
Step 1: YEARLY PREMIUM						
Monthly premium (yearly premium \$/12 months)						
Step 2: OTHER COSTS Insert deductible, copay/coinsurance and OOP max amounts below.	In	Out	In	Out	In	Out
Deductible						
Copay/coinsurance <small>Note: When entering a percentage, enter the decimal point. For example, enter 30% as ".30" and not "30."</small>						
OOP max						
Step 3: NETWORK Review maximum costs below.	In	Out	In	Out	In	Out
Use only IN-NETWORK providers? This number could decrease depending on how you use your plan.		Maximum cost		Maximum cost		Maximum cost

Definitions:

Out-of-pocket (OOP) max: The highest amount you could pay in a given year for services (excludes premium).

Copay/coinsurance: The amount you pay per visit or prescription to treat an injury or illness. It typically counts toward your OOP max. Please check plan details and definitions to confirm.

Deductible: The amount you pay for services before the plan begins to pay. It typically counts toward your OOP max. Please check plan details and definitions to confirm.

Premium: The amount you pay for this plan, regardless of whether services are received.

Other factors include employer health savings account (HSA) or health reimbursement arrangement (HRA) contributions if you select a high-deductible plan (HDHP).



Just remember: The amount you pay could vary with lighter usage (preventive services) or heavier usage (managing a chronic condition).

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